ORDER FOR CERTIFIED COPY OF DEATH CERTIFICATE

FOR ALL PERSONS WHO DIED IN SEATTLE CITY LIMITS (ALL YEARS) OR IN KING COUNTY (1944 FORWARD) ONLY

VITAL STATISTICS

Public Health - Seattle & King County Box 359784 325 Ninth Ave Seattle, WA 98104-2499

_	Toll-free: 1-8	800-325-6165, ext. (6-4768; Local:	206-296-4768			
QU	JANTITY cop	oies @ \$20.00 each =	= \$				
MA	KE CHECK PAYABLE TO	VITAL STATISTICS					
	l Name First Deceased:	Middle	Last	Age of D	eceased:		
Pla (Ci	ice of Death ty):						
	te of Death 10-year period to search):						
	me of neral Home:			A/C No.			
SIGNED:				DATE:			
RE	LATIONSHIP TO PERSOI	N WHOSE CERTIFICA	ATE IS REQUE	STED?			
Please Note: Any time a record is searched for and not found, an \$8.00 search fee is charged per the Revised Code of Washington (RCW 70.58.107).						DEATH	
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						CK. MO. CASH AMT. RC'D \$ INDEX NO. YR. REC. SRCH.	NLY
	Name and address of	person requesting o				CK. MO. CASH AMT. RC'D \$ INDEX NO. YR. REC. SRCH.	NLY
PLEASE PRINT	Name and address of NAME	person requesting o				CK. MO. CASH AMT. RC'D \$ INDEX NO. YR. REC. SRCH.	NLY